



TOWN OF PEMBROKE

BOARD OF SELECTMEN AND TOWN ADMINISTRATOR'S OFFICE

100 Center Street, Pembroke

(781) 293-3844 ~ Fax (781) 293-4650

Fiscal Year: _____

MUF Account#: _____

Abatement Number: _____

Map & Parcel#: _____

REQUEST FOR SENIOR MUNICIPAL USERS FEE ABATEMENT

To be eligible for this abatement, **the applicant or spouse** at the qualifying address must be **70 years of age or older** before July 1st of this fiscal year.

Name: _____
Last Name, PRINTED First Name, PRINTED

Address: _____

Telephone Number: _____ Email: _____

- 1. **Do you live alone?** _____
- 2. **Your Date of Birth:** _____ Form of ID Shown: _____
Verifier's Initials: _____
- 3. **If no, is your spouse over age 70?** _____
- 4. **Spouse's Date of Birth:** _____ Form of ID Shown: _____
Verifier's Initials: _____

I certify that the above statements are true to the best of my knowledge by signing below.

Signature: _____

To be eligible for this abatement, **the applicant and spouse** at the qualifying address must **submit documentation of a fixed income that does not exceed \$32,000 for one person or \$36,000 for two people**. Without it, this application is incomplete and will not be considered.

Proof of fixed income will be any **one** of the three items below:

- 1. A copy of your most recent individual (for one) or joint (for two) **tax return**.
- 2. A copy of each person's **End of Year Statement for Social Security & Pension**, if applicable.
- 3. A copy of your most recent **Bank Statement** showing each person's deposit of monthly Social Security and Pension, if applicable.

Approved: _____ Denied: _____

Edwin J. Thorne, Town Administrator

This abatement will be credited to the **SECOND SEMI-ANNUAL BILL**. Payment of the **FIRST SEMI-ANNUAL BILL IN FULL**, including any applicable late fees, **is required** before any abatement is issued.